Facade Improvement Grant Disbursement Request

This form is to request grant funds AFTER the project is one hundred percent (100%) complete.

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Property Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Award Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Complete the below expenditure log.
* Only use approved vendors as outlined in your application request.
* Do not include ineligible expenses.

Attach RECEIPTS OR OTHER PROOF OF PAYMENT from each vendor.

Email JPG photo(s) of building renovations to dwatson@bartoncounty.org.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| APPROVED VENDOR | DESCRIPTION OF SERVICES | INVOICE  AMOUNT | GRANTOR PORTION 75% | GRANTEE PORTION  25% |
| *ABC Company* | *Stucco* | *$13,500.00* | *$10,125.00* | *$3,375.00* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| TOTAL | | $ | $ | $ |

**Remit to:**

**Barton County Façade Improvement Grant**

Diana Watson, Administrative Assistant

1400 Main, Room 107

Great Bend, Kansas 67530

620.793.1800 / [dwatson@bartoncounty.org](mailto:dwatson@bartoncounty.org)

This completed and signed form.

* Attach RECEIPTS OR OTHER PROOF OF PAYMENT from each vendor.
* EMAIL jpg(s) of building renovations photo(s) to [dwatson@bartoncounty.org](mailto:dwatson@bartoncounty.org).

Other than the jpgs, information may be hand-delivered, mailed or emailed to the above address.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Barton County to provide a full copy to the participating City.